

Osbourne, Joseph Rathbun, John Rooney, Patrick Rosanio, Benjamin Searle, Nathaniel Stewart, Connor Sweeney, Jake Szelewski, Devin White, Wendall Williams, Jeevon Works

# THE MEDIA OWNERSHIP ACT

**HON. JAY INSLEE**

OF WASHINGTON

IN THE HOUSE OF REPRESENTATIVES

*Wednesday, December 19, 2007*

Mr. INSLEE. Madam Speaker, as much of America now knows, yesterday in a split decision, the Federal Communications Commission (FCC) voted to approve new media ownership rules that in many ways are far worse for the public interest than anything previously revealed by FCC Chairman Martin.

Prior to yesterday's vote. Chairman Martin had attempted to portray his proposal as a "moderate compromise" that would allow one company to own both a daily newspaper and a low-rated broadcast TV station in only the 20 largest media markets. But research from Free Press—collected in the Devil in the Details report—exposed how the loose and ambiguous "waiver" standards in the proposal left a giant loophole for companies to sidestep the ban in any market and for any station.

The final rule, rewritten in the middle of the night before the hearing, retains all of the original loopholes and adds additional loopholes that appear to allow cross-ownership mergers in virtually any market.

While I had held out hope that the FCC would delay this vote given the outpouring of public commentary opposing the rule changes, it is clear that the Chairman of the FCC is not listening. I see no other choice than to push for congressional action, and to that end, yesterday I introduced H.R. 4835, the Media Ownership Act of 2007, in the House to stop these new cross-ownership rules from going forward.

I am pleased to have been joined by my Washington State colleague Representative DAVE REICHERT in this bipartisan effort, and it is my hope that we can move swiftly to prevent these new rules from going into effect. This effort is the companion to work being done in the Senate Commerce Committee where a bipartisan group of Senators have led the effort against these changes.

When Chairman Martin was before the Energy and Commerce Committee earlier this month, I asked him how he could ignore the public outcry he heard when he visited Seattle, Washington, where—despite less than 5 days notice—thousands turned out and stayed until 1 a.m. on a Friday night to voice their concerns. I asked him how we could believe that he had thoughtfully considered the public's concerns, when less than 3 days later, the Chairman published an op-ed in the New York Times outlining his plan for media consolidation.

Clearly, Chairman Martin is not listening to the American people, and now we need to step up and ensure that their voices are heard. I hope my colleagues here in Congress will join me in this effort, and I hope this legislation moves swiftly.

MOURNING THE DEATH OF  
FORMER CONGRESSMAN AUGUSTUS  
FREEMAN "GUS" HAWKINS

**HON. AL GREEN**

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

*Wednesday, December 19, 2007*

Mr. AL GREEN of Texas. Madam Speaker, I wish to mourn the passing of former Congressman Augustus Freeman "Gus" Hawkins, a committed public servant and civil rights leader, who died on November 10, 2007. Congressman Hawkins was born on August 31, 1907, in Shreveport, LA. He later moved to California where he would eventually serve 14 terms in the U.S. House of Representatives, advocating for his constituents in South Los Angeles. Prior to his passing, he was the oldest living former member of the House of Representatives at the age of 100.

In his youth, Mr. Hawkins was a scholar and civil rights activist. In 1931, he received his undergraduate degree in Economics from the University of California, Los Angeles. One year later, he continued his academic pursuits and studied political science at the University of Southern California. In addition to his intellectual skills and political savvy, Mr. Hawkins was a primary leader in progressive and civil rights campaigns in the urban areas of Los Angeles. His desire to eliminate injustice in his community propelled him to challenge a Republican incumbent in the California State Assembly. He defeated his opponent and quickly became the 62nd district's voice for civil rights and equality regardless of race, creed, or color. He remained in the California State Assembly from 1935 to 1963.

In 1963, Mr. Hawkins was elected to serve California's 21st Congressional District in the U.S. House of Representatives, making him the first African American elected from the State of California. He firmly demonstrated his commitment to public service by supporting legislation that would improve housing standards, labor, education, and conditions for the working poor. He made history by sponsoring the equal employment section of the Civil Rights Act of 1964 that created the Equal Employment Opportunity Commission. In addition, he fought consistently to raise the minimum wage and he and Senator Hubert Humphrey (D-Minnesota) crafted the Humphrey-Hawkins Act of 1978, which was designed to combat unemployment and inflation. During his 28 years in the House, he served as the chairman of the Committee on Education and Labor, and the chairman of the Committee on Administration. He was also one of the founding members of the Congressional Black Caucus, which was founded in 1971. When he retired in 1991, he had created over half a century's worth of landmark legislation on both the State and Federal level.

Madam Speaker, I urge my colleagues to remember the legacy and mourn the passing of former Congressman Augustus Freeman Hawkins.

ARTHUR I. JACKNOWITZ, PROFESSOR AND DISTINGUISHED CHAIR, DEPARTMENT OF CLINICAL PHARMACY CONCERNED ABOUT CMS COMPOUNDING POLICY

**HON. EDOLPHUS TOWNS**

OF NEW YORK

IN THE HOUSE OF REPRESENTATIVES

*Wednesday, December 19, 2007*

Mr. TOWNS. Madam Speaker, I would like to call my colleagues' attention to a compelling letter written by Arthur I. Jackowitz, Pharm. D, Professor and Distinguished Chair in the Department of Clinical Pharmacy at West Virginia University's School of Pharmacy at the Robert C. Byrd Health Sciences Center in Morgantown, WV. Writing on behalf of more than 650 pharmacies and 359,000 Medicare beneficiaries in West Virginia, Professor Jackowitz expressed his deep concern over the adverse impact that CMS's new policy excluding compounded inhalation medications from Medicare beneficiaries would have in West Virginia and across the Nation.

Madam Speaker, I ask unanimous consent to enter Professor Jackowitz's letter into the RECORD.

WEST VIRGINIA UNIVERSITY,  
SCHOOL OF PHARMACY,  
*Morgantown, WV, October 30, 2007.*

KERRY WEEMS, ADMINISTRATOR,  
Centers for Medicare and Medicaid Services, 200  
Independence Avenue, SW, Room 314 G,  
Washington, DC.

DEAR ADMINISTRATOR WEEMS: Compounding pharmacists play an essential role in many patients' lives by enabling physicians to prescribe customized medication therapy to best meet their needs. Indeed, for the growing number of people with unique therapeutic requirements that cannot be addressed with commercially available products, a compounded product may be the only viable treatment option.

Compounding of medications for patient use has been a significant component of the practice of pharmacy and medicine since the beginnings of our profession. Virtually all practicing pharmacists will be involved with compounding activities at some point during their career. In fact, it is estimated that the 30 to 40 million prescriptions are compounded each year. Pharmacists are the only health care professionals that have studied chemical compatibilities and can prepare alternate dosage forms. In fact, each state requires that pharmacy schools must, as part of their core curriculum, instruct students on the compounding of pharmaceutical ingredients. Compounding pharmacies are licensed and regulated by their respective state boards of pharmacy, rather than the FDA.

With this mind, I am writing to you as a Professor of Pharmacy and on behalf of more than 650 pharmacies and 359,000 Medicare beneficiaries they serve in our state of West Virginia to express my concern about the Center for Medicare and Medicaid Services (CMS) new policy excluding compounded inhalation medications from Medicare beneficiaries. CMS issued this new policy without explanation or medical rationale driven by the Food and Drug Administration's (FDA) posture and legal position regarding compounding. It is a reversal of your agency's long-standing policy on inhalation medications. By excluding compounded inhalation medications for Medicare beneficiaries stating that they are no longer medically necessary you are discriminating